

APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention	CATHETER DISTAL TIP DESIGN AND METHOD OF MAKING
Application Type: regular, utility Attorney Docket Number: S63.2-11022-US01	
Correspondence address: Customer Number: 490 *490*	
Inventors Information: <u>Inventor 1:</u> Applicant Authority Type: Inventor Citizenship: US Given Name: Jan Family Name: Weber City of Residence: Maple Grove State of Residence: MN Country of Residence: US Address-1 of Mailing Address: 18112 89th Place North Address-2 of Mailing Address: City of Mailing Address: Maple Grove State of Mailing Address: MN Postal Code of Mailing Address: 55311 Country of Mailing Address: US Phone: Fax: E-mail:	

Inventor 2:

Applicant Authority Type: Inventor
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Attorney Information:

Name	Registration Number
Ms. Lisa L. Ryan-Lindquist	43071

Assignee 1:

Organization Name: Scimed Life Systems, Inc.
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